Prescription Drug Misuse Prevention Education for Youth  
An RFP for organizations in Kentucky, Ohio, Tennessee and West Virginia

People are prescribed and consume billions of prescription medications in the U.S. alone each year. Prescription and over-the-counter medicines are typically accessible and visible in our homes. Children and young people should understand prescription and over-the-counter medication safety at an early age. Unfortunately, prescription drug misuse continues to be a significant issue in the United States, including with youth:

Approximately 12 percent of 12th graders have misused a prescription medication within the last year, and 18 percent will misuse during their lifetime.¹

Medications are the 3rd most commonly misused substance by Americans age 14 and older, after alcohol and marijuana.²

Research tells us, people are most likely to begin abusing drugs—including tobacco, alcohol, and illegal and prescription drugs—during adolescence and young adulthood.³

Every day, more than 5,700 people ages 12 and older misuse a prescription pain medication for the first time.⁴

The most effective approach to reducing prescription drug misuse is preventing it before it starts. This request for proposals (RFP) is intended to drive prescription drug misuse youth prevention education into communities – through schools, youth organizations, families, or anywhere that impacts a young person. We thank you for your interest in the Generation Rx Prescription Drug Misuse Prevention Education for Youth Grant Program.

The common elements of effective prevention have long been researched. One great resource that summarizes the principles of effective prevention programs for reaching youth and young people is the National Institute on Drug Abuse’s (NIDA) document titled Lessons from Prevention Research. This RFP is informed by NIDA’s long-term research and we urge all interested in responding to this RFP to carefully review this document.

Why focus on prevention education for youth?  
Since 2009, the Cardinal Health Foundation has partnered with communities and non-profit organizations across the country to raise awareness about the dangers of prescription drug misuse. Together with The Ohio State University College of Pharmacy, we are committed to educating youth and young people about medication safety and preventing prescription drug misuse through our Generation Rx program. Our educational resources focus on educating children, teens and university students, among others, about medication safety and misuse prevention via age-appropriate concepts and activities. We are deeply committed to supporting communities who want to work together to keep youth from misusing medications, and who see prevention education as a key driver to reducing misuse and ultimately, addiction to prescription medication. Our goal is that this funding will be a catalyst to help communities prevent prescription drug misuse through education.
Please note: We are also requesting proposals for Best Practices in Pain Medication Use and Patient Engagement and for Community-Level Responses to the Opioid Crisis programs. Please click here to learn more.

This request for proposal seeks to achieve one goal: To help youth and young people understand medication safety and use medicines appropriately.

Objectives:
Successful grant proposals must describe how each of these objectives will be achieved.

1. Provide interactive, prescription drug misuse prevention education through multiple educational experiences over 12 months, to a minimum of 500 youth.
2. Collaborate with at least one other youth-serving group or organization within the school/university or community, with the goal of extending the learning into multiple environments that can influence youth and young people.
3. Extend education beyond youth and young people to also include trusted adults. Research shows that when adults talk to teens about drugs, the youth are 50% less likely to use. Medication safety education should extend to the adults in the youth’s lives in order to teach them but also to have them teach the education to the youth and young people as well.
4. Measure outcomes in terms of people reached, schools/organizations involved, and post-test evaluations to determine knowledge gained and intended behavior change.

Objective 1: Prevention education
All proposals must include a detailed plan on the education that youth or young people will learn. Youth is defined as children in grades K-12 and young people are defined as ages 18-24. Include the following information in your plan:

- Key educational messages that will be shared.
- Content - There are many evidence-based or evidence-informed resources available to educate youth about substance use prevention, including Generation Rx educational resources. The use of Generation Rx resources in your prevention education programming is required. Additional resources may be created or used based on the needs and capacity of your schools, community and youth. If other resources are used, please provide links to, or examples of, education or an outline for the content of the education. They must align with the Generation Rx key messages:
  - Take medication exactly as prescribed and never share your medication.
  - Store prescription drugs in locked and secure locations and properly dispose of medications that you no longer need; and
  - Promote safe medication practices and teach others to do the same.
• Audience – describe who is being taught, as well as who is doing the teaching. Describe why you chose that audience to learn about medication safety, and why you chose the person/group to do the teaching.
  o This grant is focused on educating youth in grades K-12 and college level. You may narrow the age your programming focuses on, or you may keep it broad. Your programming does not have to include students in every grade or all students in a school/organization. Education should be taught universally (for example, all 6th graders or all members of an organization), not just to those students identified as “at-risk” or already identified as misusing.
  o Prevention education for college level students must also include a component of programming that includes college level students teaching youth in grades K-12.

• How the education will be shared (format(s) and frequency). The more interactive, educational experiences with youth throughout the year, the better. Use of interactive methods and appropriate booster sessions helps to reinforce earlier program content and skills to maintain program benefits.  
  o Multiple education experiences where the same educational concepts are taught repeatedly to youth and young people is strongly preferred.
  o The multiple educational experiences can happen across multiple environments – for example, in the classroom, at campus activities, in residence halls, in an after-school activity, with a community-based organization, etc. The point is to give ongoing medication safety education to youth and young people via multiple touch points in their lives.

• Who will develop and present the education.

Youth-led prevention
If you plan to engage in youth-led prevention, either existing or would like to begin, describe the following:
  • Brief description of your organization’s experience in youth-led prevention, or interest in starting.
  • Your proposed youth-led prevention programming and how it will be planned, executed and evaluated. Youth-led prevention can be peer to peer (high school student to high school student) or peer to younger person (college student to high school student, high school student to middle school, etc).

The following resources can be helpful to you in understanding and implementing prevention education with youth and young people:
  • Generation Rx educational resources for elementary, teens and university students
  • Ohio Attorney General Mike DeWine has published a report on drug use prevention education that includes a wide variety of well-documented and effective resources. [Link]
  • State of Ohio’s HOPE Curriculum resources for teachers
  • Partnership for Drug-Free Kids resources for parents
  • PAX Good Behavior Game

[Link]
Objective 2: Collaboration
Collaborate with at least one other youth-serving group or organization within the school/university or community, with the goal of extending the learning into multiple environments to influence the same youth and young people. Examples of organizations to collaborate with may include, but are not limited to:

- Athletic, arts, civic, or service organizations
- Faith-based organizations
- After school or summer programs
- Healthcare professionals – prescribers, pharmacists, nurses, etc.
- Law enforcement
- Local government
- Other

Objective 3: Extend education to trusted adults
Research shows that when adults talk to teens about drugs the youth are 50% less likely to use. Medication safety education should extend to the adults in the youth’s lives in order to teach them but also to have them teach the education to the youth and young people as well.

- All proposals must include a detailed plan on how you intend to engage and educate the trusted adults who are in the lives of youth and young people. Describe your audience, content, and frequency of communication throughout the grant period. Audiences may include, but are not limited to:
  - Parents, family members, or guardians
  - Teachers, faculty, staff in schools/universities
  - After school or summer programs
  - Athletic, arts, civic, or service organizations
  - Faith-based organizations
  - Healthcare professionals – prescribers, pharmacists, nurses, etc.
  - Other

Objective 4: Measure outcomes
All applicants should describe the measures they will track, and will be asked to estimate expected outcomes in the grant application. These should include, but do not need to be limited to:

- Estimated number of youth and/or young people who will receive education (by age or audience)
- Estimated number of direct touchpoints (per youth or young person described above) you intend to have over the 12 month grant period
  - Estimated number of direct touchpoints per communication method: in classroom, at an organization’s meeting, at a community event, email, social media, other
• Estimated number of schools/classes that will be involved (by age)
• Estimated number of organizations that will be involved (by category of organization)
• Estimated number of trusted adults that will be educated (adults that have direct impact on youth or young people)
• Estimated number of direct touchpoints per communication method: in person at youth’s school, at an organization meeting, at a community event, email, social media, other
• How and when do you plan to measure: Who will be involved in the process to create the metrics, gather the data and analyze the results? How often will you measure impact and capture outcomes during the grant cycle?
• Contact information for the person responsible for leading the grant outcomes.
• If you have an existing prescription drug misuse prevention education program, share any outcome summaries you have reported to date.
• A final outcome summary asking for your outcomes to the above and additional measures will be required at the end of the grant cycle; we will provide a link to the summary report for grantees to complete.

Proposal Criteria
Who is eligible to apply?
• Eligible applicants include any 501(c)(3) non-profit organizations in Kentucky, Ohio, Tennessee and West Virginia.
• We encourage applications from any of the following organizations: K-12 schools (public, private, charter), after school programs, organizations who are currently working with schools/youth organizations on other prevention programs, community coalitions, community, civic or faith-based organizations, higher education institutions, health centers, or any healthcare organization. Please contact us at communityrelations@cardinalhealth.com if you have any questions about eligibility before starting your proposal and grant application.
• We encourage applications from organizations/collaboratives that would like to work across multiple schools, youth-serving organizations or communities. Please contact us (communityrelations@cardinalhealth.com) to discuss how best to apply.
• A W-9 and IRS Letter of Determination of the organization applying for the grant must be included. The Tax ID listed on the W-9 and the IRS Letter of Determination must match. Fiscal agents are permitted with a letter of support from the fiscal agent.
• This will be a competitive funding opportunity.

Resources available
We anticipate funding grants of approximately $25,000 to $35,000, depending on the scope of work proposed. Additional support will be considered for organizations that are also incorporating youth-led prevention in to the medication safety prevention education. Please note: If the work described in the proposal cannot be completed for less than the amount requested, please be sure to include this information in the budget narrative. Funding from other sources is encouraged, if needed.
We intend to bring grantees together regularly throughout the 12 month grant cycle via conference calls/webinars for the purpose of learning from each other and providing technical assistance. Technical assistance will be provided through local, regional and national experts on topics such as:

- Effective youth-led prevention
- Delivering education to children and teens
- Reaching parents
- Creating connections between adults and the youth they lead
- Effective prevention education in higher education

**What to include in the grant application**
The following provides an overview of each of the three sections that must be included in your grant application. Please limit your overview and proposal (section one) to no more than seven pages, single spaced, no smaller than size 12 font. (This does NOT include the budget template, budget narrative, letters of support or your proposed programming content/presentation documents.)

**Section one: Overview and proposal**
- **Organizational capacity** - Include a very brief description of your organization, including background information and any relevant experience it has with working with youth and young people, including teaching substance use prevention.

- **Supporting organizations** – If your organization is proposing to collaborate with another organization(s), include an overview of the organization(s), provide detail about the specific role of each organization and about how your organizations will work together. *Each supporting organization must submit a letter of support as part of the grant application.*

- **Proposal** – Your detailed proposal should include the four objectives previously described:
  1. Prevention education
  2. Collaboration
  3. Extend education to trusted adults
  4. Measure outcomes

**Timeline** – Provide a detailed, specific timeline of how you will plan, execute and evaluate the prevention education you have proposed. We anticipate dispersing grant funds in February or March 2018, so grant programming should run March 2018 – March 2019.

**Section two: Budget and budget narrative**
Submit a budget using the budget template spreadsheet (located on [http://www.cardinalhealth.com/en/about-us/corporate-citizenship/community-relations/population-health/rx-drug-misuse-and-abuse.html](http://www.cardinalhealth.com/en/about-us/corporate-citizenship/community-relations/population-health/rx-drug-misuse-and-abuse.html)), and a budget narrative. Include all costs associated with the grant, detailing what is requested from the Cardinal Health Foundation and what will be provided by other funders or as in-kind contributions from your organization. Indirect costs should not exceed 15% of the total grant request to the Cardinal Health Foundation.
Examples of appropriate and eligible costs include (but are not limited to):

- Staff time to manage the education program
- Evaluation support to measure expected outcomes
- Education materials
- Training of educators and volunteers
- Event costs associated to training/holding events
- Marketing/promotion materials

The Cardinal Health Foundation funds may NOT be used to fund the following:

- The purchase of products or services that Cardinal Health manufactures or sells
- Capital expenditures

Section three: Attachments

The following documents should be included as attachments to your grant application submission:

1. Overview and proposal
2. Budget template
3. Budget narrative
4. W-9
5. IRS Letter of Determination
6. Examples of proposed educational pieces or outline of content for the education (please combine multiple documents into one PDF document)
7. Letters of support from the organizations partnering with you on the grant (please combine multiple letters into one PDF document)

Timeline

- October 24, 2017: Request for Proposals released
- November 1, 2017 (3:00 pm EST): Informational webinar*
- November 6, 2017 (11:00 am EST): Informational webinar*
- January 12, 2018 (11:59 pm EST): Online proposals due
- March or April 2018: Grant awards announced and funds dispersed

Informational webinars will be held on November 1, at 3:00 pm EST and November 6, at 11:00 am EST to assist prospective grantees in submitting successful proposals and to provide an overview and answer questions regarding the grant program. (Content of both webinars is the same; please attend only one.) *Webinar log-in credentials will be posted here. The presentation will be recorded and made available for those not able to attend the webinar live.

Submission information

All proposals must be submitted using the online application by **11:59 pm EST on Friday, January 12, 2018.** This application can be accessed, along with the required budget template, at **CardinalHealth.com/GenerationRx.**

*Hard copy or email submissions will NOT be accepted, nor will proposals submitted after the deadline. If you are submitting for multiple Cardinal Health Foundation grants, a separate application, proposal and corresponding attachments are required for each grant.*
Please be patient as we review all grant applications and make funding decisions. Announcements will be made as quickly as possible.

Questions should be directed to the Cardinal Health Foundation at communityrelations@cardinalhealth.com.

Good luck!

References:


